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AUG 30 2007**FAX TRANSMISSION****DATE:** August 30, 2007**PTO IDENTIFIER:** Application Number 10/634,304-Conf. #7963
Patent Number**Inventor:** Paulo PACHECO et al.**MESSAGE TO:** US Patent and Trademark Office/MS RCE**FAX NUMBER:** (571) 273-8300**FROM:** LAHIVE & COCKFIELD, LLP
Kevin J. Canning/NID/cfo**PHONE:** (617) 994-0732**Attorney Dkt. #:** MWS-030RCE**PAGES (Including Cover Sheet):** 25**CONTENTS:** Fee Transmittal (1 page in duplicate)
Amendment After Final (19 pages)
Request for Continued Examination Transmittal (1 page)
One Month Request for Extension of Time Under 37 CFR 1.136(a) (1 page)
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PTO/SB/97 (08-04)

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Application No. (if known): 10/634,304

Attorney Docket No.: MWS-030RCE

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PTO/SB/17 (06-07)

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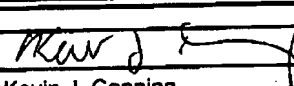
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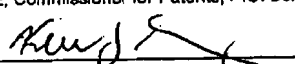
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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL For FY 2007		Complete if Known	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number	10/634,304-Conf. #7963
		Filing Date	August 4, 2003
		First Named inventor	Paulo PACHECO
		Examiner Name	R. P. Wang
		Art Unit	2191
TOTAL AMOUNT OF PAYMENT (\$) 910.00		Attorney Docket No.	MWS-030RCE

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<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: <u>12-0080</u> Deposit Account Name: <u>Lahive & Cockfield, LLP</u>	
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<input checked="" type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee <input checked="" type="checkbox"/> Credit any overpayments

FEE CALCULATION							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	
							Small Entity
							Fee (\$)
2. EXCESS CLAIM FEES							
Fee Description							
Each claim over 20 (including Reissues)							50 25
Each independent claim over 3 (including Reissues)							200 100
Multiple dependent claims							360 180
							Multiple Dependent Claims
							Fee (\$)
							Fee Paid (\$)
Total Claims Extra Claims Fee (\$) Fee Paid (\$) 44 44 0 0							
HP = highest number of total claims paid for, if greater than 20.							
Indep. Claims Extra Claims Fee (\$) Fee Paid (\$) 4 4 0 0							
HP = highest number of independent claims paid for, if greater than 3.							
3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) _____ - 100 = _____ / 50 = _____ (round up to a whole number) x _____ = _____							
							Fees Paid (\$)
4. OTHER FEE(S)							
Non-English Specification, \$130 fee (no small entity discount)							790.00
Other (e.g., late filing surcharge): 1801 Request for continued examination (RCE) (see 37 ...							120.00
1251 Extension for response within first month							

SUBMITTED BY			
Signature		Registration No. (Attorney/Agent)	35,470
Name (Print/Type)	Kevin J. Canning	Telephone	(617) 994-0732
		Date	August 30, 2007

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Dated: August 30, 2007	Signature:  (Kevin J. Canning)